Title of Person Signing President	5-22-10 S	SECTION V - Certification certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.	This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.  (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	This is to advise the Commission that no comptaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.	SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	PREVIOUS YEAR TOTAL 11	TOTAL 10	Service Workers 9	Laborers and Helpers 8	Operatives 7	Craft Workers 6	Administrative Support 5 Workers	Sales Workers 4	Technicians 3	Professionals 2	Managers Unicides and 1.2	Cincials and Officials and	Executive/Senior Level 1.1				Categories	5		SECTION III - Part-Time Employees.
	Typed or Printed Name of P Stephan J Suker	vledge, inform	Commission to g parties invo	Commission to	nation Comp		0												>	Maie	<u>ام</u>	Hispa			es.
	Typed or Printed Name of Person Signing Stephan J Suker	nation, and be	hat the followi	nat no compia competent juri	olaints Pursu		0									-			В	Female	Latino	Hispanic or			
	son Signing	lief, all statem	ing complaints d, courts or aç	ints regarding	ant to 47 CFF		0												С	White					
OF ANY ST.		ents in this re	alleging viola gencies before	) violations of I ch matters dur	₹ 22.321, 23.5		0									***************************************			D	Black or African American					
WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE BOMISHABLE BY OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1).		port are true a	ations of the pa	the equal emp	55, 90,168, 10		0												[3]	Native Hawaiian or Other Pacific Islander	Ma				
TEMENTS MA	Signature	and correct.	rovisions of ar atter has beer	oloyment prov dar year cover	1.4, and 101.		0												Tì	Asian	Male				
STRUCTION I	$\mathbb{Y}$		y equal emplo heard, file no	isions of Fede ed by this rep	311.		0												G	American Indian or Alaska Native			F	Number of Employees (Report employees in only one category)	
FORM ARE	N		oyment opport	eral, state, terri			0												н	Two or more races		Not-Hispanic or Latino	Race/Ethnicity	Number of Employees employees in only one c	
J.S.C. 312 (A)			tunity statute I c designation,	itorial, or local			0												_	White		c or Latino		yees one category)	
(1) AND/OR			have been file and current s	l statutes hav			0												ل	Black or African American					
ORFEITURE			d against this tatus or dispo	e been filed aç			0												*	Native Hawailan or Other Pacific Islander	Female				
(47 U.S.C. 5	(802) 77		company. sition.	ainst this			0												-	Asian	ale				
03).	(802) 775-6726				:		0									And the second s			3	American Indian or Alaska Native		:			
Y FINE AND/OR IMPRISONMEN (18 U.S.C. 1001) AND/OR KEVOCATION AND/OR FORFEITURE (47 U.S.C. 503).							0												z	Two or more races					
VOCATION						0	0	0	0	0	0	0	0	0	0		,	0	0		A-N	Total			

## FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3050-0076 Est. lime per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT [Please read instructions before completing and for Notice regarding public burden.]

Contract   Vermont Communications, Inc.   Contract	SECTION 1 - General Information															
Paper   Place   Plac	<ol> <li>Name and Mailing Address of F Central Vermont Com 1697 US Route 4, Suil Rutland, VT 05701</li> </ol>	Respondent Imunicati te 5	ons, Inc.											Che is a a	ck here if this change of ess.	
Colifornia Emplioyees	2. Year Report Filed 2018		3. Reporting Period Co 4/30	Period (Endi	ng Date of Pa	y		4. Number o	Full-Time En Period (check wer than 16 (c	nployees duri	ng Selected	V only)				
Abba   Hispanic of   Laino   Hispanic of Laino   Hispanic of   Hispani	SECTION II - Full-Time Employee	25.						L	of lifete (com	bioto all section	Jis)					
Abba   Hispanic or   Hispani				***************************************		***************************************		Num	ber of Emplo	yees		***************************************	***************************************			
Adaptic   Hispanic of Lutillo   Hispanic o								(Report emplo	oyees in only	one category)						
Regories         Higganic or Latino         Indigenic or Latino	Job								Race/Ethnicity							
Male   Female   White   Back or   Paralla	Categories	Hisp	anic or						Not-Hispan	c or Latino						Total
Malle Female White Aller Aller Aller Normore White Aller Normore White Aller Normore White Aller Normore White Aller Normore Normore Aller Normore White Aller Normore		,	- Fair			Ma	ie					Fem	ale			Columns A - N
American Curier Padric Native Marked		Male	Female	White		Native Hawaiian or	Asian		Two or more races	White	Black or African	Native Hawaiian or	Asian		Two or more races	
A B C D E F G H I J K L M N N N N N N N N N N N N N N N N N N						Other Pacific Islander		Alaska Native			American	Other Pacific Islander		Alaska Native		
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